# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

FORM D

JAN 22 ZUUB

Washington, DC

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL						
OMB Number: 3235-0076						
Expires:	Expires:					
Estimated average burden hours per response 16.00						
SEC USE ONLY						
Prefix		Serial				
DATE RECEIVED						

Filing Under (Check box(es) that apply):  Type of Filing: ☑ New Filing □ Amendment	□ Rule 504	□ Rule 505	图 Rule 506	☐ Section 4(6)	□ ULOE
	A. BASIC	IDENTIFIC	ATION DAT	`A	
1. Enter the information requested about the issuer					
Name of Issuer ( check if this is an amendment and	l name has changed	, and indicate cha	nge.) MGA Tac	tical Opportunity, LLC	
Address of Executive Offices (Number and Str 1125 South 103 Street, Suite	eet, City, State, Zip 250	Code) T Omaha, N	•	r (Including Area Code) (402) 3	— 08021816 93-1300
Address of Principal Business Operations (if different from Executive Offices)	(Number and	Street, City,	State, Zip Co	de) Telephone	Number (Including Area Code)
Brief Description of Business Investment Limited	Liability Company	y			PROCESSES
•	mited partnership, a limited partnership,	•		other (please specif Limited liability compan	2000
	ization: ization: (Enter ada; FN for other fo		0 7  J.S. Postal	■ Actual □ Est	FINANCIAL

#### GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information requested for the following:	
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10%</li> </ul>	or more of a class of equity securities of the issuer
Each executive officer and director of corporate issuers and of corporate general and managing partr	
<ul> <li>Each general and managing partner of partnership issuers.</li> </ul>	
Check Box(es) that Apply:	Pirector 🗷 General and/or Managing Partner
Full Name (Last name first, if individual) McCarthy Group Advisors, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code) 1125 South 103 Street, Suite 250	, Omaha, NE 68124
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer D	Director General and/or Managing Partner
Full Name (Last name first, if individual) Jarvis, Richard L.	
Business or Residence Address (Number and Street, City, State, Zip Code) 1125 South 103 Street, Suite 250,	Omaha, NE 68124
Check Box(es) that Apply:   ☑ Promoter ☐ Beneficial Owner ☑ Executive Officer ☐	Director General and/or Managing Partner
Full Name (Last name first, if individual) Burtscher, Art N.	
Business or Residence Address (Number and Street, City, State, Zip Code) 1125 South 103 Street, Suite 250,	Omaha, NE 68124
Check Box(es) that Apply:   ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐	Director General and/or Managing Partner
Full Name (Last name first, if individual) McMahon, Andrea	
Business or Residence Address (Number and Street, City, State, Zip Code) 1125 South 103 Street, Suite 250,	Omaha, NE 68124
Check Box(es) that Apply:	Director General and/or Managing Partner
Full Name (Last name first, if individual) Wilwerding, Douglas and Elaine	<del></del>
Business or Residence Address (Number and Street, City, State, Zip Code) 914 N 143 <sup>rd</sup> Circle, Omaha, NE 68	154
Check Box(es) that Apply:  Promoter  Beneficial Owner  Executive Officer  D	irector General and/or Managing Partner
Full Name (Last name first, if individual) Fontenelle Nature Association Endowment	
Business or Residence Address (Number and Street, City, State, Zip Code) 1111 North Bellevue Road, Bellevi	ue, NE 68005
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ ☐	oirector
Full Name (Last name first, if individual) Kugler, G. Diane	
Business or Residence Address (Number and Street, City, State, Zip Code) 1603 Norris Avenue, McCook, N	E 69001
(Use blank sheet, or copy and use additional copies of this sheet,	as necessary.)
B. INFORMATION ABOUT OFFERING	:
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?.	Yes No □ 🗷
Answer also in Appendix, Column 2, if filing under ULOE.	ORI A
2. What is the minimum investment that will be accepted from any individual?	<b>\$NA</b> Yes No
3. Does the offering permit joint ownership of a single unit?	⊠ □

states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) ..... □ All States [GA] [HI] [ID] [CO] [DC] [FL] [AL] [AK] [AZ] [AR] [CA] [CT] [DE] [IL][IN][IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO] [PA] [MT] [NV] [NJ] [NM] [NY] [NC] [ND] [OK] [OR] [NE] [NH] [OH] [WY] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [PR] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers ☐ All States (Check "All States" or check individual States) ...... [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID] [MN] [MS] [MO] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [MT] [NE] [WV] [WI] [WY] [PR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Name of Associated Broker or Dealer States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) ..... ☐ All States [HI] [ID] [AL] AK [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [IL] [IN] [KS] [KY] [LA] [MA] [MI] [MN] [MS] [MO] [lA] [ME] [MD] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] MT [NE] NV] [NH] [WV] [WI] [WY] [PR] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA]

4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Offering Price Sold Type of Security \$0 Debt ..... Equity ..... \$0 \$0 ☐ Common ☐ Preferred \$0 \$0 Convertible Securities (including warrants) ..... Partnership Interests \$0 \$0 Other (Specify ). Limited Liability Company Interests \$ 500,000,000 \$ 0 \$ 500,000,000 \$0 Total ..... Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases \$ NA Accredited Investors ..... Non-accredited Investors ..... \$ \$ Total (for filings under Rule 504 only) ..... Answer also in Appendix, Column 4, if filing under ULOE. 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Dollar Amount Type of Security Type of offering Sold Rule 505 ..... Regulation A ..... Rule 504 ..... Total ..... 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of

the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the

Transfer Agent's Fees

Printing and Engraving Costs .....

Legal Fees .....

Accounting Fees .....

Engineering Fees

Sales Commissions (specify finders' fees separately) .....

Total .....

estimate.

Other Expenses (identify)

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X

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П

\$500

\$0

\$3,000

#### C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted \$499,996,500 gross proceeds to the issuer." 5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. Payments to Officers, Directors, & Payments To Affiliates Others Salaries and fees Purchase of real estate Purchase, rental or leasing and installation of machinery and equipment ..... Construction or leasing of plant buildings and facilities...... Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) ..... Repayment of indebtedness ..... Working capital ..... Other (specify): Purchase securities pursuant to objectives set \$499,996,500 × forth in LP Agreement Column Totals ..... Total Payments Listed (column totals added) ..... \$499,996,500 D. FEDERAL SIGNATURE The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502. Issuer (Print or Type) Date Signature 1/15/08 MGA Tactical Opportunity, LLC Name of Signer (Print or Type) Title of Signer (Print or Type) Andrea McMahon Managing Director **ATTENTION** Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE				
1. Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes No □ 🗷			
See Appendix, Column 5, for state response.				
2. The understand issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on F	orm D (17			

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239,500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
MGA Tactical Opportunity, LLC	anhun memaha	1/15/08
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
Andrea McMahon	Managing Director	

### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## APPENDIX

1	2	.,	3	4				5 Disqualification	
	Intend to non-accinvestors (Part B-l	eredited in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)			under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL	163	140		Investors	Amount	Thvestors	Amount	165	140
AK									
AZ									
AR			_						
CA									
СО									
CT									
DE									
DC									
FL									
GA		·							
ні									
ID									
IL									
IN									
IA							 		
KS									
KY									
LA									
ME MD	•								
MA									
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MN									
MS									
МО									

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1	2 3 4				5				
			<b></b>	<del>1</del>			Disqualification		
	74	4!!	Type of security				under State ULOE		
!	Intend		and aggregate		m 6:			(if yes, attach explanation of	
	to non-ac					investor and			
	investors		offered in state (Part C-Item 1)	4		chased in State		waiver gi (Part E-l	
	(Part B-	item 1)	(Part C-Item 1)			C-Item 2)		(Parte-	item 1)
				Number of		Number of		·	
G	.,	.,		Accredited		Non-Accredited		. V	N7 -
State	Yes	No	<u> </u>	Investors	Amount	Investors	Amount	Yes	No
MT									
NE		X	LLC Interests; Open	10	open	0			X
NV									
NH									
NJ									
NM									
NY						3			
NC									
ND									
ОН									
ОК									
OR									
PA									
RI									
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